

01-07-02  
COMMISSIONER OF PATENTS AND TRADEMARKS  
Washington, DC 20231

PATENT  
Date: December 21, 2001  
File No. 2206.66001

Sir:

Transmitted herewith for filing is the patent application of  
Inventor(s): Keith Dirks & James McCambridge

I hereby certify that this paper is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: Box Patent Application, Comm. for Patents, Washington, D.C. 20231, on this date.

December 21, 2001  
Date

Express Mail Label No.: EL846174194 US

For: HEATED MASSAGER WITH MASSAGING  
LIQUID DISPENSER

Enclosed are:

- (X) 22 pages of specification, including 21 claims and an abstract.
- (X) an executed oath or declaration, with power of attorney.
- ( ) an unexecuted oath or declaration, with power of attorney.
- (X) 3 sheet(s) of informal drawing(s).
- ( ) sheet(s) of formal drawings(s).
- (X) Assignment(s) of the invention to Wahl Clipper Corporation.
- (X) Assignment Form Cover Sheet.
- (X) A check in the amount of \$ 40.00 to cover the fee for recording the assignment(s) is enclosed.
- ( ) Information Disclosure Statement.
- ( ) Form PTO-1449 and cited references.
- ( ) Associate power of attorney.
- ( ) Priority Document.

Fee Calculation For Claims As Filed

a) Basic Fee						\$ 740.00
b) Independent Claims	<u>3</u>	-	<u>3</u>	=		x \$ 84.00 = \$ <u>0</u>
c) Total Claims	<u>21</u>	-	<u>20</u>	=	<u>1</u>	x \$ 18.00 = \$ <u>18.00</u>
d) Fee for Multiple Dependent Claims						\$280.00 = \$ <u>0</u>
Total Filing Fee						\$ <u>758.00</u>

- ( ) Applicant qualifies as a Small Entity, reducing Filing Fee by half to \$ \_\_\_\_\_
- (X) A check in the amount of \$ 758.00 to cover the filing fee is enclosed.
- ( ) Charge \$ \_\_\_\_\_ to Deposit Account No. 07-2069.
- ( ) Other \_\_\_\_\_
- (X) The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 07-2069. A duplicate copy of this sheet is enclosed.

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